U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 06806	2. Fiscal Year Covered From:			
	1 / 1 / 2005 Through: 12 / 31 / 2005			
3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name Gary O Tillis	Name Laborers' District Council of Charleston, WV			
	Labor Organization File Number 020~918			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street One Union Square, Suite 5	Street One Union Square, Suite 5			
City Charleston	City Charleston			
State West Virginia ZIP Code + 4 25302	State West Virginia ZIP Code + 4 25302			
5. Position in labor organization. Business Manager				
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions): A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of				
monetary value from an employer whose employees your organizati 6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street	7.b. Amount.			
City				
State ZIP Code + 4				
Sign	ature			
Sign 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the			

Name of Person Filing Gary Tillis	File Number U- 06806			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Mid-Atlantic Laborers Cooperation Trust Trade Name, if any:	a. Labor Organization			
P.O. Box, Bldg., Room No., if any Street 12355 Sunrise Valley Drive, Ste 240	b. Trust c. Employer			
City Reston State Virginia ZIP Code + 4 20191				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name	As a trustee of the Mid-Atlantic Laborers' Cooperation Trust, Gary Tillis attended two quarterly Board of Trustees meetings on 4/29/05 and			
Trade Name, if any:	12/8/05. In addition, he received a Christmas Gift Basket (value of \$172.50) from the Trust in December 2005.			
P.O. Box, Bldg., Room No., if any				
Street	11.b. Approximate dollar value of such dealing. \$381			
City State ZIP Code + 4	12.a. Nature of interest held or income received. Direct payment by Mid-Atlantic Laborers' Cooperation Trust of expenses (hotel, food and beverages) incurred in connection with attendance at two quarterly Board of Trustees meetings at Stonewall Resort in Roanoke, WV, and receipt of Christmas Gift Basket.			
	12.b. Amount. \$381			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bidg., Room No., if any				
Street				
City				
State ZIP Code + 4				
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.			

Name of Person Filing	Gary	Tillis
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File Number U- 06806

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name West Virginia Laborers' Pension Trust Fund	a. Labor Organization	
Trade Name, if any:	(A)	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street One Union Square, Suite 4	c. Employer	
City Charleston		
State West Virginia ZIP Code + 4 25302		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	Marketin in the Assessment of Assessment Section (Assessment Secti
Name (As a trustee of the West Virginia Trust Fund, Gary Tillis attended a	ın educational
Trade Name, if any:	conference in Miami, FL on 4/16/05	through 4/20/05.
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$2,250
	12.a. Nature of interest held or income received.	
	Direct payment by West Virginia La Trust Fund of expenses (travel, ho beverages) incurred in connection at West Virginia Laborers' Pension educational conference in Miami, F 4/20/05.	tel, food and with attendance Trust Fund
	12.b. Amount.	\$2,250